DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

7500 Security Boulevard,

Baltimore, Maryland 21244-1850

An Important Message for Medicare Patients:

This letter is to let you know about a new Medicare program called "prior authorization" that may apply to you if you receive certain types of durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) items now or in the future. Under prior authorization, your DMEPOS supplier will submit documentation to Medicare before an item is provided so that Medicare can make sure all relevant Medicare requirements are met. **This new program doesn't change your Medicare DMEPOS benefits or Medicare coverage requirements and you should not experience delays accessing needed items.**

This program will begin on March 20, 2017 in Illinois, Missouri, New York, and West Virginia for the DMEPOS described below. Medicare began accepting prior authorization requests for the two codes below on March 6, 2017 for these four states.

At this time, the only two types of equipment that will require prior authorization under this program are those with the following codes:

1) K0856: Power wheelchair, group 3 std., single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds and,

2) K0861: Power wheelchair, group 3 std., multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds.

What do I need to do?

You don't need to take any action. If your physician prescribes one of the wheelchairs mentioned above to you, your DMEPOS supplier will, in most cases, submit a prior authorization request and all documentation to Medicare on your behalf. You can choose to submit the request yourself if you get the required documents from your DMEPOS supplier and physician.

How will I know if the request was approved?

Medicare will send a decision letter to your DMEPOS supplier. You may contact your DMEPOS supplier regarding the prior authorization decision and request a decision letter, and you may also contact Medicare by calling 1-800-MEDICARE. Also, your DMEPOS supplier may voluntarily send you a decision letter.

How can I learn more or provide feedback on my experience?

Information is always available to patients by calling 1-800-MEDICARE.

Additional information about this program is posted on the CMS website, available at: https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/DMEPOS/Prior-Authorization-Process-for-Certain-Durable-Medical-Equipment-Prosthetic-Orthotics-Supplies-Items.html.

This website also provides information regarding how to provide feedback on your experience with this program.

If you want to report possible fraud, visit Medicare.gov or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.F